MICHAEL SKEVOFILAX, Minor, et al.	*	**IN THE**
Plaintiffs,	*	**CIRCUIT COURT**
v.	*	**FOR**
AVENTIS PASTEUR, INC., et al.,	*	**BALTIMORE CITY**
Defendants.	*	**Case No.: 24-C-03-002575 OT**

* * * * * * * * * * * * *

PLAINTIFFS' EXPERT WITNESS DESIGNATION

Plaintiffs, by their undersigned counsel and pursuant to Md. Rule 2-402(f)(1)(A), provide the following information in accordance with this Court's Scheduling Order:

1. Mark R. Geier, M.D., Ph.D.
   14 Redgate Court
   Silver Spring, Maryland 20905

The witness' resume is attached hereto and includes information related to his qualifications, background and professional experience. Generally, the witness will testify based on his background, training, education, and professional experience in the fields and areas referenced on his resume. In certain instances, the witness may testify as to medical and/or scientific articles brought to his attention by counsel for the Plaintiffs. To the extent that defense counsel has any wish to question the witness about additional documentation, the witness is fully prepared to review such documentation and provide responses to whatever questions defense counsel may have. Generally, the witness will provide opinions based on reasonable medical and scientific probability.

The witness may testify that thimerosal did not need to be used as a

preservative in pediatric vaccines because it was ineffective, toxic and unnecessary since single-dose vials could have been used, and because substitute materials were available. The witness may also testify that European countries were able to ban the use of thimerosal in vaccines in the 1980's due to concerns about neurotoxicity. The witness may testify that impediments to ceasing use of thimerosal included additional costs to the manufacturer associated with substitution or repackaging, as well as additional costs to change production methods.

It is anticipated that the witness will testify that exposure to thimerosal in vaccines either causes or substantially contributes to cause neurological and/or neurodevelopmental injury, including some injuries subsumed within the autism spectrum, to a small percentage of susceptible children. The witness may testify as to the effect of mercury on the developing brain generally as well as the specific effects of thimerosal and ethylmercury, including the enhanced potential for injury to infants due to their reduced ability to excrete heavy metals. Based on medical and scientific literature and the witness' professional experience, as well as specific research related to the subject matter of cases of this nature, the witness may testify that some, but certainly not all, cases of neurological and/or neurodevelopmental injury among infants are caused, at least in substantial part, by the exposure in question.

The witness may testify as to the differences and similarities between ethyl and methyl mercury. The witness may testify that ethylmercury appears to have a more toxic effect than methylmercury, including longer and more significant brain retention. The witness may testify that the ethylmercury preservative in pediatric vaccines

provides a sufficient dose of mercury to cause neurological and/or neurodevelopmental injury. The witness may also testify as to pathways or biological methods of injury caused by mercury generally and ethylmercury and thimerosal specifically. The witness may testify concerning the dramatically enhanced toxicity of mercury, ethylmercury and thimerosal when exposure occurs with simultaneous exposure to aluminum, antibiotics, breast milk and testosterone. The witness may testify as to the susceptibility and/or sensitivity of certain individuals more likely to sustain injury resulting from mercury exposure. The witness may testify concerning the relative properties of ethyl and methyl mercury as well as the different modes of exposure to organic, mercury, including ingestion, subcutaneous injection, and intravenous injection. The basis for causation opinions will be consistent with the principles espoused by Sir Bradford Hill in his paper, "The Environmental Disease: Association or Causation?", Proc. R. Soc. Mag. 58:295-300 (1965).

Please see attached report produced to the Institute of Medicine by Boyd Haley. The witness may testify in accordance with some or all of the opinions contained therein.

The witness may testify concerning various studies, both published and unpublished, that relate to the issue of whether neurological or neurodevelopmental injury can be caused, in whole or in part, by exposure to toxic levels of mercury found in vaccines. The witness may provide opinions related to the specific aspects of such studies, including their limitations and/or methodological flaws. The witness may further testify concerning the impact and/or potential impact of significant conflicts of interest

on the part of authors of such studies. The witness may also testify that reliance on such studies to conclude that neurological injury and/or autism are not caused by thimerosal in vaccines is flawed, both logically and due to specific methodological errors. The witness may further testify that epidemiologic studies are unable to ascertain a potential increased relative risk of neurodevelopmental or neurological injuries resulting from exposure to mercury in vaccines for a sub-population of children or infants with a greater susceptibility to injury. The witness may also testify that finding a certain relative risk is not a necessary prerequisite to concluding that the exposures in question can and do cause neurological and neurodevelopmental injury.

The witness may testify that it has been known for literally hundreds of years that mercury is a potent neurotoxin and can cause significant neurological injury. More recently, early in the 20th century, medical science became increasingly aware of the significant toxicity of organic mercurials, including ethyl and methylmercury. The witness may also testify that the medical and scientific community continue to learn additional information about the hazards of ethylmercury in thimerosal specifically after its introduction in the 1930's as a vaccine preservative. The witness may testify that the issue of using a potent neurotoxin like mercury in pediatric vaccines was questioned time and again. The witness may also testify that the potential hazardous effects of thimerosal in vaccines were discussed in the medical and scientific literature from at least 1947 until the present.

The witness may testify that defendants all knew, or with reasonable certainty had reason to know, and/or should have known, that thimerosal was a potent neurotoxin and that the levels in vaccines were likely to cause injury, at least in some susceptible individuals. The witness may also testify that various defendants publicly recognized, during the 1990's, that hypersensitivity to thimerosal was such that sensitive individuals should not be vaccinated with thimerosal-containing vaccines. The witness may testify that, at all relevant times, the defendants were aware of the significant potential impact ethylmercury in vaccines could cause on the developing minds of infants inoculated with mercury-containing vaccines. The witness may also testify that the defendants knew or should have known that mercury poisoning is a cumulative process and that a latency period must elapse before symptoms of exposure may appear. The witness may also testify that the defendants were negligent and/or careless as a result of their failure to adequately test, research, study, and/or warn concerning the toxic effects of thimerosal and that the defendants were further negligent and/or careless as a result of their failure to utilize substitute preservatives and/or to utilize mono-dose vials instead of multi-dose vials requiring a preservative.

The witness may also testify that the defendants had actual knowledge concerning the hazards and/or potential hazards of thimerosal contained in pediatric vaccines, including actual knowledge of the high levels of exposure that could result from vaccination. Despite such actual knowledge, the defendants did not adequately research, study, and/or test to determine the nature and extent of a potential hazard. The witness may testify that the defendants consciously and deliberately disregarded a

foreseeable harm that might result to the minor Plaintiff and to others similarly situated. conduct. The witness may also testify with respect to an attitude of indifference and/or lack of concern of the defendants with respect to the potential injuries that could be caused by their products.

The witness may testify that there were insufficient warnings and insufficient labeling provided with respect to the potential hazards of thimerosal contained in pediatric vaccines, especially concerning the cumulative dose and effect of various vaccines administered on the same date or close in time. The witness may also testify that the defendants failed to warn that mercury was known to cause significant neurological and neurodevelopmental injury, including mercury poisoning and mental retardation; failed to warn, in some instances, even of the presence of mercury in their products; failed to warn of the synergistic toxicity of mercury and aluminum contained in their vaccines and failed to warn of individual factors that could increase the toxic effect of mercury; failed to warn that certain individuals are or can be more susceptible to injury from mercury; and failed to warn that exposure levels from the vaccines could exceed 100 times the referenced dose.

The witness may testify that thimerosal-containing pediatric vaccines were unreasonably dangerous, i.e. more dangerous than would have been contemplated by the ordinary user or consumer since such vaccines contained unsafe and toxic levels of mercury and because of the sensitivity of the infant and its developing brain in the first two years of life. The witness may testify that the extreme nature of the hazard associated with mercury is such that a failure to identify the mercury content of the

vaccines in and of itself rendered such products unreasonably dangerous. Furthermore, the potential life threatening consequences and significant symptoms that can result from mercury poisoning and/or toxicity rendered such products unreasonably dangerous and more dangerous than could have been reasonably understood by any member of the public and/or minor Plaintiff's physicians.

The witness may testify as to significant conflicts of interest that have affected the scientific and medical debate related to whether significant doses of mercury in pediatric vaccines can cause or contribute to cause neurological or neurodevelopmental injury. The witness may testify that conflicts of interest exist between members of the vaccine industry and the authors of published articles concerning thimerosal, the journals that have published such articles, the CDC, the FDA, the National Institutes of Health, and the World Health Organization. The witness may further testify that significant and pervasive conflicts within the FDA, CDC, NIH and WHO have effected those agencies' perspectives regarding thimerosal. The witness may further testify that the pharmaceutical industry has the power, capability and motivation to influence the published literature concerning any issue of significance to the industry, including but not limited to thimerosal. The witness may testify that studies published in the literature that are influenced by the industry tend to have a pro-industry bias. The witness may further testify that changes in protocol and/or study design often result in the bias of industry-paid and/or industry-influenced scientists or researchers. The witness may also testify specifically with respect to the conflicts of interest that have occurred in this case, including but not limited to the conflicts of Dr. Smithburn, the

conflicts of Thomas Verstraeten, and the conflicts of various presenters, committee members and reviewers of the Institute of Medicine. The witness may also testify concerning other conflicts of interest and the industry's efforts to influence the scientific debate by arranging for and/or assisting and/or promoting the publication of articles and other information concerning thimerosal.

2. Boyd E. Haley, Ph.D.
Advanced Science Technology Commercialization Center, ASTeCC
Room A057
University of Kentucky
Lexington, Kentucky 40506

The witness' resume is attached hereto and includes information related to his qualifications, background and professional experience. Generally, the witness will testify based on his background, training, education, and professional experience in the fields and areas referenced on his resume. In certain instances, the witness may testify as to medical and/or scientific articles brought to his attention by counsel for the Plaintiffs. To the extent that defense counsel has any wish to question the witness about additional documentation, the witness is fully prepared to review such documentation and provide responses to whatever questions defense counsel may have. Generally, the witness will provide opinions based on reasonable medical and scientific probability.

The witness may testify that thimerosal did not need to be used as a preservative in pediatric vaccines because it was ineffective, toxic and unnecessary since single-dose vials could have been used, and because substitute materials were available. The witness may also testify that European countries were able to ban the

8. Louis J. Maccini, Ph.D.
The Johns Hopkins University
Department of Economics
3400 North Charles Street
Mergenthaler 440
Baltimore, Maryland 21218

Dr. Maccini is a professor of economics at The Johns Hopkins University. A copy of his c.v. is attached. Based on his expertise, experience and review of pertinent data and information including the Life Care Plan prepared by Dr. Voogt, Dr. Maccini will testify about the economic losses sustained by Michael Skevofilax as a result of his condition and impairments, including a net income loss and the future cost of his care and treatment. The substance of Dr. Maccini's findings, the opinions to which he is expected to testify and a summary of the grounds for each opinion are set forth in his report "The Economic Loss to Michael Skevofilax", a copy of which is attached.

Plaintiffs also reserve the right to elicit opinions from any expert(s) designated by the Defendant(s).

Paul W. Spence
Spence, Kohler & Christie, P.A.
401 Washington Avenue, Suite 701
Towson, Maryland 21204
(410) 823-8200

C. ANDREW WATERS, Esquire
Waters & Kraus, LLP
3219 McKinney Avenue, Suite 3000
Dallas, Texas 75204

SHANLON WU
Waters & Kraus, L.L.P.
7312 Rebecca Drive
Alexandria, Virginia 22307

GEORGE G. TANKARD, III, Esquire
10015 Old Columbia Road
Suite B-215
Columbia, Maryland 21046

Attorneys for Plaintiffs

CURRICULUM VITAE

Name	Mark Robin Geier	
Address	14 Redgate Court Silver Spring, MD 20905	
Date of Birth	May 3, 1948	
Place of Birth	Washington, D.C.	
Marital Status	Married (Anne Watson Geier) Son - David (born 10/05/80)	
Education	1970	B.S. George Washington University Washington, D.C.
	1970-1971	Graduate Student Department of Human Genetics and Development, Columbia University, N.Y.C., N.Y.
	1973	Ph.D. George Washington University, Washington, D.C.
	1978	M.D. George Washington University, Washington, D.C.
Work Experience	1969-1970	Research (Student) at the National Institutes for Health
	1970-1971	NIH Traineeship at Columbia University, Department of Human Genetics and Development, N.Y.C.
	1978-1979	Intern and Fellow, Department of Obstetrics and Gynecology, The Johns Hopkins Hospital, Baltimore, Maryland
	1979-1982	Assistant Professor, Department of Gynecology and Obstetrics, The Johns Hopkins School of Medicine, Baltimore, Maryland
	1980-1982	Guest Worker Laboratory of General and Comparative Biochemistry, NIMH, NIH
	1981-1984	Assistant Research Prof. Psych. Department U.S.U.H.S., Bethesda, Maryland
	1988-1994	Director of Genetics of Maryland Medical Laboratory, Inc., Baltimore, Maryland

	1989-1994	Member of the Substance Abuse and Doping Committee and the Sports Medicine and Science Committee of the U.S. Bobsled and Skeleton Federation (Olympic Committee)
State Licensors:		Maryland, September 1979-present; Virginia, October 1992-present
Board Certification:		American Board of Medical Genetics, 1987 Associate Member of the American College of Medical Genetics, 1993 Board Certified by the American Board of Forensic Examiners 1996 Diplomate of the American Board of Forensic Medicine 1996
Other Positions:	1980-present	Co-director of Genetic Consultants of Maryland, Rockville, Maryland
	1980-present	Laboratory Directory Molecular Medicine, Maryland
	1981-present	Director of Institute of Immuno-Oncology and Genetics, Maryland
	1986-present	President of Genetic Counseling and Research, Inc., T/A The Genetic Center Baltimore, Maryland
	1997-present	President of Genetic Counseling and Research, Inc., T/A The Ultrasound Institute of Baltimore, Maryland
	1997-present	President of The Genetic Centers of America
	2001	Host of one hour weekly medical talk show "The Dr. Mark Geier Show" on KFNX in Phoenix, Arizona, WALE in Provident, Rhode Island and on the World Wide Web.
	2001	Clinical and Experimental Rheumatiology Journal Peer-Reviewer
	2002	Environmental Health Perspectives Journal Pee-Reviewer
	2002	Expert Reviewer of Vaccines Journal Peer-Reviewer

Professional Societies: Sigma Psi

American Association for Advancement

National Board of Medical Examiners, Diplomat

American Society of Human Genetics

Montgomery County Medical Society

American Fertility Society

In Who's Who in America 1992-present

Publications:

1. Merril, C.R., Geier, M.R. "The effect of freezing and DEAE-D in spheroplast assay" Virology 42: 780-82 (1970).

2. Merril, C.R., Geier, M.R. Petricciani, J. "Bacterial virus gene expression in human cells." Nature 233: 398-400 (1971).

3. Geier, M.R., Merril, C.R. "Lambda phage transcription in human fibroblasts." Virology 47: 638-643 (1972).

4. Petricciani, J.C., Binder, M.K., Merril, C.R., Geier, M.R. "Galactose utilization in galactosemia" Science 175: 1368-1370 (1972).

5. Binder, M.K., Petricciani, J.C., Merril, C.R., Geier, M.R. "Aspects of galactosemic cell cultures." Med. Annals of D.C. 41: 228-230 (1972).

6. Merril, C.R., Friedman, T.B., Attallah, A., Krell, K., Geier, M.R., Yarkin, R. "Isolation of bacteriophages from commercial sera." In Vitro 8: 91-93 (1972).

7. Merril, C.R., Geier, M.R., Petricciani, J.C. "Bacterial gene expression in mammalian cells." Advances in the Bio-Sciences Vol. 8: 229-342 (1972).

8. Geier, M.R., Trigg, M.E., Merril, C.R. "The Fate of Bacteriophage Lambda in Non-Immune Germfree Mice." Nature, 246: 221-222, (1973).

9. Geier, M.R. "The Effect of Prokaryotic Genes in Eukaryotes." Ph.D. Dissertation submitted to The George Washington University 1973.

10. Geier, M.R. "Abstract of the Effect of Prokaryotic Genes in eukaryotes." DAI 34 (1973):5. George Washington University.

11. Geier, M.R., Trigg, M.E., Merril, C.R. "A Model System for the Evaluation of the Fate of Phage in Contaminated Vaccines." Physiologic Disposition of Bacteriophage in Mice. Proceedings of the Workshop of Problems of Phage Contamination. FDA 1973.

12. Trigg, M.E., Geier, M.R., Merril, C.R. "Screening For Genetic Disease." The New England

Journal of Medicine 289: 755 (1973).

13. Merril, C.R., Geier, M.R., Trigg, M.E. "Transduction in Mammalian Cells." Proceedings of The Fourth International Conference of Birth Defects. Ed. A.G. Mutlusky and W. Lentz. Excerpta Medica, Amsterdam, pp 81-91, 1973.

14. Geier, M.R., LaPolla, R.J. "Cholesterol Degradation in Human Serum in Vitro by Cell-free Nocardia Erythropolis Extracts." International Research Communications System. Vol. 2, 1380 (1974).

15. Geier, M.R., LaPolla, R.J. "Degradation of Cholesterol in Human Serum." Biochemical Medicine 11: 290-294 (1974).

16. Trigg, M.E., Geier, M.R., and Merril, C.R. "Trapping of Antigen in Spleen." New England Journal of Medicine 292: 214 (1975).

17. Geier, M.R., Attalah, A., Merril, C.R. "Characterization of Escherichia coli Bacterial Viruses in Commercial Sera." In Vitro 11: 55-58 (1975).

18. Trigg, M.E., Geier, M.R., Merril, C.R. "Comparative Distribution and splenic accumulation of bacteriophage lambda in conventional mice." International Research Communication System 3: 261 (1975).

19. LaPolla, R.J., Geier, M.R, Friedman, T.B, Merril, C.R. "Co2 production from galactose-1-phosphate uridyl transferase-deficient \E. Coli.\" Journal of Bacteriology 124, 558-561 (1975).

20. Trigg, M.E., Geier, M.R., LaPolla, R.J., Kamerow, H.N., Merril, C.R. "Addition of leucine precursors to the diet of leucine-starved mice." Journal of Clinical Nutrition Vol. 28: 947-949 (1975).

21. Geier, M.R., Kamerow, H.M., Merril, C.R. "The effect of large and small rubber particles on the distribution of bacteriophage in conventional mice." International Research Communications System 3: 493 (1975).

22. Merril, C.R., Geier, M.R., Rolfe, B.C. "Characteristics of bacterial gene expression in human fibroblasts." The Eukaryotic Chromosome. Ed. W.J. Peacock and Brock Australian National University Press, Camberra pp 459-471 (1976).

23. Geier, M.R., Stanbro, H., Merril, C.R. "Endotoxins in Commercial Vaccine." Applied and Environmental Microbiology 36, 445-449 (1978).

24. Trigg, M.E., Hitchens, J., Hutchinson, G., Geier, M.R. "Low Maternal Serum AFP and Down Syndrome." Lancet 2, 161 (1984).

25. Trigg, M.E., M.R. Geier "Maternal Serum Alpha-Fetoprotein Screening in the Private Section." American Journal of Human Genetics 36(4): 1895 Supplement (1984).

26. Geier, M.R. "Endotoxin in DTP Vaccines." The committee to review the adverse consequences of pertussis and rubella vaccines. The Institute of Medicine of The National Academy of Sciences. Jan. 10, 1990.

27. Geier, M.R., Young, J.L., Kessler, D.K. "Too Much of Too Little Science in Sex Selection Techniques?" Fertility & Sterility 53(6) 1111-1112 (1990).

28. Geier, M.R. "Implications for Evaluating Possible Neurotoxic Consequences of Pertussis or Rubella Vaccine." The Institute of Medicine of The National Academy of Sciences. May 14, 1990.

29. Geier, M.R. "High Cutoffs of Maternal Serum Alpha-fetoprotein Screening by Using Sample Percentiles." The American Journal of Human Genetics 1/V 47(#3) Suppl A1081.

30. Geier, M.R., Young, J.L. "Criticism on Update of MSAFP Policy Statement from the ASHG." The American Journal of Human Genetics 47: 740-741 (1990).

31. Geier, M.R. "Rubella Vaccination." Fertility & Sterility 56(1): 229 (1992).

32. Geier, M.R., Trigg, M.E. "On the Relationship Between Academic and Private Genetic Services." The American Journal of Human Genetics 51: 890-891 (1992).

33. Trigg, M.E., Geier, M.R. "University of Maryland's experience chronic villus sampling: A different view of this questionable procedure." Maryland Medical Journal 42(1): 20-23 (1993).

34. Geier, M.R. "The Conquest of Polio." Washington Post 25 October 1994.

35. Geier, M.R. "Early Amnio vs. Late Amino vs. CVS." Structural Fetal Problems the Total Picture Baltimore Ultrasound Education & Research, Trust, Inc. (May 28-31, 1998).

36. Kao-Shan, C.S., Arnoff, A.R., Trigg, M.E., Geier, M.R. "Chromosomal instability in a patient with Nijmegen breakage syndrome." American Journal of Human Genetics 59(4): A121 (1996).

37. Geier, M.R. "Universal CF & Fragile X Screening & the Future of Genetic Counseling." Structural Fetal Problems The Total Picture Baltimore Ultrasound Education Research, Trust, Inc. (May 28-31 1998).

38. Geier, M.R., Geier, D.A. "Arthritic Reactions Following Hepatitis B Vaccine: An Analysis of the Vaccine Adverse Events Reporting System, (VAERS), From 1990 Through 1997." Clinical and Experimental Rheumatology 18: 789-790 (2000).

39. Geier, M.R., Geier, D.A. "Hepatitis B Vaccine and Gastroenterological Adverse Reactions." Hepato-Gastroenterology 48(37) (2001).

40. Geier, M.R., Geier, D.A. "Immunological Reactions and Hepatitis B Vaccine." Annals of Internal Medicine 134: 1155 (2001).

41. Abrams, D.J., Arnoff, A.R., Berend, S.A., Roas, B.B., Shaffer, L.G., Geier, M.R. "Prenatal Diagnosis of a Homologous Robertsonian Translocation Involving Chromosome 15." Prenatal Diagnosis 21: 676-679 (2001).

42. Geier, M.R., Geier, D.A. "On Smallpox, Cipro and Stockpiling." Washington Post 25 October

2001: A30.

43. Geier, D.A., Geier, M.R. "Rubella Vaccine and Arthritic Adverse Reactions: An Analysis of the Vaccine Adverse Events Reporting System (VAERS) Database From 1991 Through 1998." Clinical and Experimental Rheumatology 19: 724-726 (2001).

44. Geier, M.R., Geier, D.A. "Hepatitis B Vaccination Safety." Annals of Pharmacotherapy 36: 370-374 (2002).

45. Geier, D.A., Geier, M.R. "An Analysis of the Occurrence of Convulsions and Death After Childhood Vaccination." Toxicology Mechanisms and Methods 12: 71-78 (2002)

46. Geier, D.A., Geier, M.R. "Hepatitis B Vaccination and Arthritic Adverse Reactions: A Follow-up Analysis of the Vaccine Adverse Events Reporting System (VAERS) Database." Clinical and Experimental Rheumatology 20: 119 (2002).

47. Geier, M.R., Geier, D.A. "Diseases and Epidemics." Colonization and Settlement (1585-1763) Ed. Nash G.B., Facts on File Encyclopedia of American History Series, Vol. 2 (2002).

48. Geier, M.R., Geier, D.A. "Epidemiology of the Vaccine Adverse Events Reporting System (VAERS): Proof of Causation in Various Cases." Mealey Publications & Conference Group, Vaccine Litigation Conference: 407-417 (2002).

49. Geier, D.A., Geier, M.R. "Clinical Implications of Endotoxin Concentrations in Vaccines." The Annals of Pharmacotherapy 36: 776-780 (2002).

50. Geier, D.A., Geier, M.R. "Comparison of Lyme Disease Vaccine Adverse Event Reports and Comparison to Other Vaccine Results." Lyme Disease Foundation & College of Physicians and Surgeons of Columbia University, 15th International Scientific Conference on Lyme Disease and Other Tick-Borne Disorders: 1-20 (2002).

51. Geier, D.A., Geier, M.R. "Anthrax Vaccination and Joint Related Adverse Reactions in Light of Biological Warfare Scenarios." Clinical and Experimental Rheumatology 20: 217-220 (2002).

52. Geier, D.A., Geier, M.R. "Cutaneous Immunologic Reactions to Hepatitis B Virus Vaccine." Annals of Internal Medicine 136: 780-781 (2002).

53. Geier, M.R., Geier, D.A. "The State of Polio Vaccination in the World Today: The Case for Continuing Routine Vaccination." Toxicology Methods 12:221-228 (2002).

54. Geier, D.A., Geier, M.R. "Hepatitis B Vaccination and Adult Associated Gastrointestinal Reactions: A Follow up Analysis." Hepato-Gastroenterology 49:1571-1575, (2002).

55. Geier, D.A., Geier, M.R. "An Analysis of the Reactivity of Vaccines Administered in Texas From 1991 Through 1999: Based Upon the Vaccine Adverse Events Reporting System (VAERS) Database." Texas Medicine 98:50-54 (2002).

56. Geier, D.A, Geier, M.R., "The True History of Pertussis Vaccination: A Sordid Legacy?" Journal of the History of Medicine and Allied Sciences 57:249-284, (2002).

57. Geier, D.A., Geier, M.R. "The VAERS and CDC Reportable Disease Database are New Tools for those in Vaccine Related Forensic Medicine. A Case in Point: Adult Hepatitis B Vaccine." The Forensic Examiner 11(7-8):21-28 (2002).

58. Geier, M.R., Geier, D.A. "Gastrointestinal Adverse Reactions Following Anthrax Vaccination: An Analysis of the Vaccine Adverse Events Reporting System (VAERS) Database." Hepato-Gastroenterology (In press).

59. Geier, D.A., Geier, M.R. "Gastrointestinal Reactions and Rotavirus Vaccination Based Upon Analysis of the Vaccine Adverse Events Reporting System (VAERS) Database for 1999. A Model of the Calculation of the Incidence Rates and Statistical Significance of Adverse Events Following Immunization." Hepato-Gastroenterology (In press).

60. Geier, D.A., Geier, M.R. "Smallpox and Anthrax in the United States." Emerging Drugs & Devices 7(8): 27-31 (2002).

61. Geier, M.R., Geier, D.A. "Vaccine Causation of Selected Adverse Reactions: Epidemiology of the Vaccine Adverse Event Reporting System (VAERS)." Thimerosal & Vaccines 1(1):32-42, (2002).

62. Geier, D.A., Geier, M.R. "Lyme Vaccination Safety." Journal of Spirochetal and Other Tick-Borne Diseases 9:16-22, (2002).

63. Geier, D.A., Geier, M.R." "Reply: Hepatitis B Vaccination Safety." Annals of Pharmacotherapy. 36:1649-1650, (2002).

64. Geier, D.A., Geier, M.R. " Reply: Clinical Implications of Endotoxin Concentrations in Vaccines." Annals of Pharmacotherapy. 36:1650-1651, (2002).

65. Geier, D.A., Geier, M.R. "Chronic Reactions Associated With Hepatitis B Vaccination." Annals of Pharmacotherapy. (In press).

66. Geier, D.A., Geier, M.R. "A One Year Followup of Chronic Arthritis Following Adult Rubella and Hepatitis B Vaccination: Based Upon Analysis of the Vaccine Adverse Events Reporting System (VAERS) Database." Clinical and Experimental Rheumatology. Vol. 20 (In press).

67. Geier, D.A., Geier, M.R. "Serious Neurological Conditions Following Pertussis Immunization: An Analysis of Endotoxin Levels, the Vaccine Adverse Events Reporting System (VAERS) Database and Literature Review. Pediatric Rehabilitation. (In press).

68. Geier, M.R. Testimony. "Vaccine and the Autism Epidemic: Reviewing the Federal Government's Track Record and Charting a Course for the Future." U.S. House of Representatives, the Committee on Government Reform December 10, 2002.

Back to Home Page